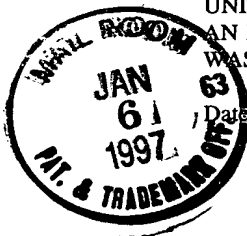


I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE WITH SUFFICIENT POSTAGE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: ASSISTANT COMMISSIONER FOR PATENTS, WASHINGTON, D.C., 20231, ON:



Date: Jan 2, 1997

By: [Signature]

Patent
Attorney's Docket No. 018413-002

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| | | |
|---------------------------------|---|----------------------|
| In re Patent Application of |) | BOX AF |
| |) | |
| R. GREFF, et al. |) | |
| |) | |
| Application No.: 08/507,863 |) | Group Art Unit: 1511 |
| |) | |
| Filed: July 27, 1995 |) | Examiner: P. Niland |
| |) | |
| For: NOVEL COMPOSITIONS FOR USE |) | |
| IN EMBOLIZING BLOOD VESSELS |) | |

RESPONSE TRANSMITTAL LETTER

Assistant Commissioner for Patents
BOX AF
Washington, D.C. 20231

Sir:

Enclosed is a response for the above-identified patent application.

☒ A Petition for Extension of Time is also enclosed.

☒ Also enclosed is a Notice of Appeal and Declaration of Michael L. Jones Pursuant to 37 C.F.R. §1.116(a).

☒ 1 verified statement(s) claiming small entity status
[] are also enclosed [X] was submitted previously.

[] A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) is also enclosed.

☒ No additional claim fee is required.

[] An additional claim fee is required, and is calculated as shown below:

A M E N D E D C L A I M S

| | NO. OF CLAIMS | HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR | EXTRA CLAIMS | RATE | ADDT'L FEE |
|--|------------------|--|-----------------|----------|---------------|
| Total Claims | | MINUS = | | x \$22 = | 0 |
| Independent Claims | | MINUS = | | x \$80 = | 0 |
| If Amendment adds multiple dependent claims, add \$260.00 | | | | | 0 |
| Total Amendment Fee | | | | | 0 |
| If small entity status is claimed, subtract 50% of Total Amendment Fee | | | | | 0 |
| TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT | | | | | 0 |

☒ A check in the amount of \$ 345.00 for the extension fee and the Appeal fee is enclosed.

☐ Charge \$ _____ to Deposit Account No. 02-4800.

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in triplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

By: Gerald F. Swiss
Gerald F. Swiss
Registration No. 30,113

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Alexandria, Virginia 22313-1404
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Date: January 2, 1997